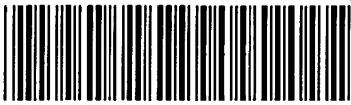


<b>Issue Classification</b>		Application/Control No.				Applicant(s)/Patent under Reexamination	
		10/708,242				LIU ET AL.	
		Examiner				Art Unit	
		Gopal C. Ray				2111	

ISSUE CLASSIFICATION															
ORIGINAL				INTERNATIONAL CLASSIFICATION											
CLASS		SUBCLASS		CLAIMED			NON-CLAIMED								
710		240		G	06	F	13 /14	G	06	F	19 /00				
CROSS REFERENCES								G	06	F	12 /00				/
CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)														
714	6														/
711	114 151 203														/
														/	
														/	
														/	
-----				<i>Gopal C. Ray</i>				Total Claims Allowed: 129							
(Assistant Examiner) (Date)				GOPAL C. RAY 1/30/07				(Primary Examiner) (Date)				O.G. Print Claim(s)		O.G. Print Fig.	
<i>Dale Hall 1/31/07</i> (Legal Instruments Examiner) (Date)												1		3	

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
1		31		91		121	
2		32		92		122	
3		33		93		123	
4		34		94		124	
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6		36		96		126	
7		37		97		127	
8		38		98		128	
9		39		99		129	
10		40		100		130	
11		41		101		131	
12		42		102		132	
13		43		103		133	
14		44		104		134	
15		45		105		135	
16		46		106		136	
17		47		107		137	
18		48		108		138	
19		49		109		139	
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22		52		112		142	
23		53		113		143	
24		54		114		144	
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26		56		116		146	
27		57		117		147	
28		58		118		148	
29		59		119		149	
30		60		120		150	

<b>Issue Classification (Contd.)</b> 	Application/Control No. 10/708,242		Applicant(s)/Patent under Reexamination LIU ET AL.	
	Examiner Gopal C. Ray		Art Unit 2111	

ISSUE CLASSIFICATION							
ORIGINAL		INTERNATIONAL CLASSIFICATION					
CLASS		SUBCLASS		CLAIMED		NON-CLAIMED	
CROSS REFERENCES						/	
CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					/	
						/	
						/	
						/	
						/	
						/	
						/	
(Assistant Examiner) (Date)		(Primary Examiner) (Date)		Total Claims Allowed:			
(Legal Instruments Examiner) (Date)				O.G. Print Claim(s)		O.G. Print Fig.	

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
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47	215	77	245	107	275	305	335
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54	222	84	252	114	282	312	342
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58	226	88	256	118	286	316	346
59	227	89	257	119	287	317	347
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63	231	93	261	123	291	321	351
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67	235	97	265	127	295	325	355
68	236	98	266	128	296	326	356
69	237	99	267	129	297	327	357
70	238	100	268		298	328	358
71	239	101	269		299	329	359
72	240	102	270		300	330	360